

Washington Metropolitan Area Transit Commission

Agent Designation Form

Use this form to designate an agent for service.

PLEASE NOTE:

- If a carrier's principal place of business is located outside the Metropolitan District, it must designate an agent for service residing in the Metropolitan District (see Regulation No. 68).
- The Metropolitan District includes the District of Columbia, Alexandria, Falls Church, Arlington County, Fairfax County, Dulles International Airport, Montgomery County, Prince George's County, and the political subdivisions located within these jurisdictions.
- A carrier may choose whomever it wishes to serve as its agent, as long as the agent resides within the Metropolitan District. Service upon an agent satisfies the Commission's responsibility to provide a carrier notice of formal complaints, investigations, and other Commission actions and notices (see Rule 5-01).

1. CARRIER INFORMATION

| | | | |
|---|--|--|-----------|
| WMATC Carrier No. | | Name of Carrier (as shown on certificate of authority) | |
| Street Address of Principal Place of Business | | City | State Zip |

2. REGISTERED AGENT INFORMATION

| | | | |
|---|-----------------|------------|-----------|
| Name of Registered Agent for Service of Process | | | |
| Agent Street Address | | City | State Zip |
| Telephone Number | Other Telephone | Fax Number | E-mail |

3. CERTIFICATION:

I certify, under penalty of perjury, under the laws of the United States of America, that the registered agent designated on this form is authorized to receive Commission actions and notices on behalf of Carrier. I further certify that I am authorized to act on behalf of Carrier and that the information on this form is true, correct, and complete as of this date.

| | |
|----------------------|-----------|
| Name (type or print) | Signature |
| Title | Date |